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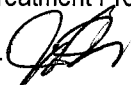
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July 14, 2009

ADPA BULLETIN NO. #09 - 01

TO: Executive Directors
Proposition 36 Contract Treatment Providers and Interested Others

FROM: John Viernes, Jr., Director 
Alcohol and Drug Program Administration

SUBJECT: **CHANGES TO THE PROPOSITION 36 PROGRAM**

This is to announce that effective July 1, 2009, important and crucial changes will be made to the Proposition 36 program. Treatment providers are encouraged to abide by the adopted changes that will affect the treatments services process and case management under the program.

1. Cases referred for Proposition 36 placement will not undergo the standard Community Assessment Services Centers (CASC) assessment process. The CASC will provide brief screenings and referral services to treatment using the Addiction Severity Index (ASI) Lite.
2. CASC will identify participants who have already received two or more Grants of Probation under Proposition 36. These persons will be advised as to the information on record and returned to the Court for proper management. CASC will update the assessment record and note this information in the comments section.
3. The Treatment Courts and Probation eXchange (TCPX) system will continue to operate as a browser-based, real-time application to support the participant referral, treatment operational, and administrative requirements of the Proposition 36 program.
4. Initial and Progress Reporting - All treatment reports will be prepared in hardcopy format and will be delivered to the courthouse by the participant. For documentation and continuation purposes progress reports will be completed in and generated by the TCPX system. Progress reporting to the Court will be set as follows:
 - Sixty (60) days for a treatment progress report
 - One-hundred-eighty (180) days for final review and dismissal

5. Primary treatment services will continue under the same guidelines as set forth by the *Summary of Treatment, Supervision and Continuing Care Services Matrix (Service Matrix, adopted October 12, 2007)* and shall not exceed 180 days:
 - Level I – maximum 90 days of treatment for Outpatient services
 - Level II – maximum 180 days of treatment for Outpatient services; 12 weeks of treatment for Day Care Habilitative; and 180 days of treatment for Narcotic Replacement Therapy
 - Level III – maximum of 90 days of Residential treatment, followed by 90 days of Outpatient Treatment in Level II.
6. The number of sessions for each level will remain at the following maximums:
 - Level I – maximum of three (3) sessions a week for Outpatient
 - Level II – maximum of five (5) sessions a week for Intensive Outpatient; three to five (3-5) sessions a week for 12 weeks for Day Care Habilitative; two to three (2-3) sessions a week for Narcotic Replacement Therapy
 - Level III – maximum of 90 days for Residential Treatment, followed by 90 days of Outpatient Treatment in Level II.
7. Continuing Care/Aftercare services will no longer be offered under the Proposition 36 program. The programs are encouraged to maintain alumni groups and on site self-help, Alcoholics Anonymous or Narcotic Anonymous meetings to support participants continued sobriety. All Proposition 36 participants regardless of level who are in primary treatment services or in Continuing Care prior to July 1, 2009, will be provided with one (1) Continuing Care visit to allow for transitioning out of the Proposition 36 program.
8. As a treatment tool, treatment providers are required to conduct random and observed drug tests of all Proposition 36 participants based on protocols established by the Services Matrix. Drug testing services will be modified as follows and will apply to all Levels of treatment services under the program:
 - One (1) random observed drug test every other week for the duration of primary treatment.

Providers are encouraged to step-down participants on a case by case basis, if the treatment provider determines, based on clinical judgment that the participant has benefited as much as possible from treatment. The treatment provider should recommend early completion to the Court or Parole. If a participant is found unamenable to treatment, the treatment provider should immediately recommend to the Court or Parole termination for non-compliance. Providers may also recommend that participants be placed in a Drug Court program. Actual drug court placements will depend upon available treatment slots.

The treatment providers shall include its informed decision regarding the participant's status, clearly recommending early termination, completion, or transfer to the Bench Officer in the participant's final (180 day) progress report. The final decision to terminate, complete, or transfer a participant will solely be determined by the Bench Officer or Parole, in conjunction with information provided by the treatment provider.

If you have any questions or need additional information, please contact your assigned Contract Program Auditor or the Proposition 36 Helpline at (888) 742-7900, Monday to Friday, from 8:00 a.m. to 5:00 p.m.

JV:yl

c: Jonathan E. Freedman
Proposition 36 Executive Steering Committee
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